UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF PENNSYLVANIA ERIE DIVISION

In re: Case No. 13-10652TPA

MICHAEL G. SLUPSKI PATRICIA A. SLUPSKI Debtor(s)

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Ronda J. Winnecour, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 05/20/2013.
- 2) The plan was confirmed on 07/12/2013.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1328 on 12/03/2013.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on \underline{NA} .
 - 5) The case was completed on 05/04/2018.
 - 6) Number of months from filing to last payment: 60.
 - 7) Number of months case was pending: <u>63</u>.
 - 8) Total value of assets abandoned by court order: <u>NA</u>.
 - 9) Total value of assets exempted: \$53,383.71.
 - 10) Amount of unsecured claims discharged without payment: \$15,188.81.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$57,510.00 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$57,510.00

\$5,956.54

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$3,700.00
Court Costs \$0.00
Trustee Expenses & Compensation \$2,256.54
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION:

Attorney fees paid and disclosed by debtor: \$0.00

Scheduled Creditors:						
Creditor		Claim	Claim	Claim	Principal	Int.
Name	Class	Scheduled	Asserted	Allowed	Paid	Paid
ASSOCIATED CLINICAL LABORATOF	Unsecured	4.82	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	9.31	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	30.44	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	20.95	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	17.88	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	41.90	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	35.76	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	60.89	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	10.86	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	20.15	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	180.48	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	5.43	NA	NA	0.00	0.00
ASSOCIATED CLINICAL LABORATOF	Unsecured	4.82	NA	NA	0.00	0.00
CLINICAL ASSOCIATES IN RADIOLOG	Unsecured	10.00	NA	NA	0.00	0.00
CLINICAL ASSOCIATES IN RADIOLOG	Unsecured	25.00	NA	NA	0.00	0.00
CLINICAL ASSOCIATES IN RADIOLOG	Unsecured	17.50	NA	NA	0.00	0.00
DEPARTMENT OF VETERANS AFFAII	Unsecured	625.46	NA	NA	0.00	0.00
DISCOVER BANK(*)	Unsecured	1,959.50	1,878.09	1,878.09	186.36	0.00
DITECH FINANCIAL LLC F/K/A GREE	Secured	77,588.67	78,323.36	0.00	37,096.62	0.00
DITECH FINANCIAL LLC F/K/A GREE	Secured	0.00	522.09	522.09	522.09	0.00
DITECH FINANCIAL LLC F/K/A GREE	Priority	0.00	675.00	675.00	675.00	0.00
ERIE PHYSICIANS NETWORK++	Unsecured	467.32	NA	NA	0.00	0.00
FIRST NATIONAL BANK OF PA(*)	Unsecured	942.26	904.40	904.40	89.74	0.00
FIRST NATIONAL BANK OF PA(*)	Secured	10,046.61	10,082.04	10,034.85	10,034.85	2,049.04
GEORGE P MOYLAN JE DDS	Unsecured	121.00	NA	NA	0.00	0.00
M & T BANK	Unsecured	NA	3,824.75	3,824.75	379.52	0.00
M & T BANK	Secured	11,709.78	0.00	0.00	0.00	0.00
PNC BANK NA	Unsecured	5,242.87	5,242.87	5,242.87	520.24	0.00
SAINT VINCENT HEALTH CENTER	Unsecured	880.00	NA	NA	0.00	0.00
SAINT VINCENT HEALTH CENTER	Unsecured	50.00	NA	NA	0.00	0.00
SAINT VINCENT HEALTH CENTER	Unsecured	168.12	NA	NA	0.00	0.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
SAINT VINCENT HEALTH CENTER	Unsecured	987.34	NA	NA	0.00	0.00
SAINT VINCENT INSTITUTE*	Unsecured	63.26	NA	NA	0.00	0.00
SAINT VINCENT INSTITUTE*	Unsecured	15.38	NA	NA	0.00	0.00
SAINT VINCENT INSTITUTE*	Unsecured	16.12	NA	NA	0.00	0.00
SAINT VINCENT INSTITUTE*	Unsecured	73.88	NA	NA	0.00	0.00
SAINT VINCENT INSTITUTE*	Unsecured	16.55	NA	NA	0.00	0.00
SAINT VINCENT INSTITUTE*	Unsecured	5.38	NA	NA	0.00	0.00
VANTAGE HOME MEDICAL	Unsecured	449.56	NA	NA	0.00	0.00
VANTAGE HOME MEDICAL	Unsecured	79.00	NA	NA	0.00	0.00

Claim	Principal	Interest
Allowed	Paid	Paid
\$10,034.85	\$47,131.47	\$2,049.04
\$522.09	\$522.09	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$10,556.94	\$47,653.56	\$2,049.04
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$675.00	\$675.00	\$0.00
\$675.00	\$675.00	\$0.00
\$11,850.11	\$1,175.86	\$0.00
	\$10,034.85 \$522.09 \$0.00 \$0.00 \$10,556.94 \$0.00 \$675.00 \$675.00	Allowed Paid \$10,034.85 \$47,131.47 \$522.09 \$522.09 \$0.00 \$0.00 \$0.00 \$0.00 \$10,556.94 \$47,653.56 \$0.00 \$0.00 \$0.00 \$0.00 \$675.00 \$675.00 \$675.00 \$675.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$5,956.54 \$51,553.46	
TOTAL DISBURSEMENTS :		<u>\$57,510.00</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 08/23/2018 By:/s/ Ronda J. Winnecour

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.